

# Wisconsin Department of Public Instruction

## Glossary of Terms For ATODA Prevention Program Assessment Tool

**Cross-Age Mentoring:** Structured programs that match older students with younger students for a specific purpose and time period. For example, middle school or high school students may be paired with elementary school students who need a meaningful relationship in their lives or extra help with academics. Cross-age mentoring programs can benefit older as well as younger at-risk students.

May also be used to describe **Intergenerational Mentoring Programs** in which adults, often senior citizens, are matched with elementary or middle school students.

**Evidence-Based:** Also **Research-Based** or **Science-Based**. The prevention program or practice is based on a theoretical model, has been subjected to rigorous field testing and evaluation that include a control group, and a pre and post-test, and has demonstrated positive outcomes over time (effectiveness).

**Model/Exemplary Programs** are available for dissemination and generally have technical assistance available from program developers.

**Effective Program** have high level of integrity, lower level of utility. Prevention programs have been rigorously evaluated and have repeatedly demonstrated positive outcomes.

**Promising Programs** demonstrate the potential for effectiveness but need further evaluation or testing with more rigorous evaluation designs.

**Environmental/Community Initiatives:** Activities whose goal is to establish or change written or unwritten community attitudes, standards, laws and codes that influence the incidence and prevalence of substance use/abuse. One example is counter-advertising campaigns.

**Goal:** A broad statement of purpose that identifies the behavior, attitude, knowledge or situation targeted for change in a specific population. A goal may have several related objectives.

**Needs Assessment:** A systematic process for examining the current status of a behavior, attitude, knowledge, or situation. The process has three steps:  
1. data collection;

2. data analysis; and
3. prioritizing behaviors, attitudes, lack of or insufficient knowledge, and negative situations that are risk factors for ATOD use/abuse.

There are two types of data that can be collected:

1. archival data: data that already exists in a variety of places;
2. survey data: existing surveys or surveys that a district creates.

Data analysis includes the following steps:

1. Look at the raw numbers for any noteworthy patterns.
2. Compare the data to previous years or data collection cycles, and analyze (a) how patterns have changed over time (trends), and (b) how patterns have changed in relation to specific populations.
3. Compare data with similar county, state, and national data for any noteworthy patterns.
4. Interpret the data by asking (a) what are the patterns, both positive and negative, (b) what [risk and protective] factors in your community and school are associated with the patterns, and (c) what other information do you have that relates to the patterns?
5. Identify the relationships across data patterns.

**Normative Education:**

Programs designed to correct common misperceptions about the prevalence of a particular behavior such as substance use. For example, students routinely over-estimate the number of their peers harmfully involved with substances. Normative education can help change attitudes that are favorable toward use, and foster pro-social norms within the culture of a peer group, classroom, grade, school or community.

**Objective:**

There are three types of objectives, all of which relate directly to and support the achievement of a goal:

1. Outcome Objective: a measurable change in a behavior, attitude, knowledge or situation within a specific period of time.
2. Intermediate Objective: a measurable change that will lead to achieving the outcome objective.
3. Process Objective: a measurable effort in services delivered or products produced that will lead to achieving the outcome objective.

**Prioritizing Needs:**

Identification of the most prevalent negative [risk] patterns, the developmental stage(s) when children are most at risk, and any “clusters” of behaviors, attitudes, and events based on your data analysis.

**Program Fidelity:**

An assessment of how closely the local implementation matches the key components of a program as designed by the developers and as evaluated in field tests. Assessment of program fidelity includes the following:

1. Identify and understand the theoretical foundation of the program.

2. Identify the program's core values and assumptions to ensure they are a "match" for your school and community.
3. Identify and understand the core components of the program – those program ingredients that are essential to the replication of positive outcomes demonstrated in program evaluations.
4. Identify the program components that are open to modification or adaptation, given local conditions.
5. Document the training provided specific to the program, and the staff trained.
6. Document the number of core components implemented and by whom.
7. Evaluate program effectiveness.

**Resources  
Assessment:**

A systematic process for examining the current financial, organizational, and human resources that can be leveraged to continue and improve the comprehensive ATODA prevention program. The process has three steps:

1. collect information;
2. analyze the resources for effectiveness; and
3. identify the gaps.